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**OFFICE OF PETITIONS** 

**SOWLE,** Eddie D. et al.

In re Application of

P.O. BOX 2903

MERCHANT & GOULD PC

MINNEAPOLIS MN 55402-0903

Application No. 09/501,876

Filed: February 10, 2000

Attorney Docket No. 163.1173USI1

DECISION ON PETITION

TO WITHDRAW FROM RECORD

This is a decision on the Request to Withdraw as attorney or agent of record under 37 C.F.R. § 1.36(b), filed January 22, 2007.

The request is **APPROVED**.

A grantable request to withdraw as attorney/agent of record must be signed by every attorney/agent seeking to withdraw or contain a clear indication that one attorney is signing on behalf of another/others. A request to withdraw will not be approved unless at least 30 (thirty) days would remain between the date of approval and the later of the expiration date of a time to file a response or the expiration date of the maximum time period which can be extended under 37 C.F.R. § 1.136(a).

The request was signed by Sarah M. Monfeldt. The undersigned attorney has been withdrawn; all other attorneys remain of record.

The correspondence address of record remains unchanged.

There is an outstanding Office action mailed October 10, 2006 that requires a reply from the applicant.

Telephone inquiries concerning this decision should be directed to Michelle R. Eason at 571-272-4231.

Terri Williams Petitions Examiner

Office of Petitions

cc: SARAH M. MONFELDT

**United States Patent & Trademark Office** 

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Approved for use through 12/31/2008. OMB 0851-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF **CORRESPONDENCE ADDRESS** 

Application Number	109/50/874		
Filing Date	2-10-2000		
First Named Inventor	edole some		
Art Unit	1617		
Examiner Name	Gina Yu		
Attorney Docket Number	1103,11731601		

To: Commissioner for P.O. Box 1450 Alexandria, VA 22			OIPE 40	
Please withdraw me as attorney or agent for the above identified patent application, and   [ JAN 2 2 2007 ]				
all the attorneys/agents of record.				
the attorneys/agents (with registration numbers) listed on the attached paper(s), or				
the attorneys/agents associated with Customer Number				
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.				
The reasons for this request are:				
I will be employed by the PTO as a Patent Examiner effective January 22,				
2007.				
CORRESPONDENCE ADDRESS				
The correspondence address is NOT affected by this withdrawal.  The correspondence address is NOT affected by this withdrawal.				
2. Change the correspondence address and direct all future correspondence to:				
The address associated with Customer Number.				
			· <b>__</b>	
OR				
Firm or Individual Name				
Address	• •	·		
	•			
City		State	Zip	
Country	,			
Telephone	Δ .		Email	
Signature Saul	L Mon 4 lot			
Name Sarah M	. Monfeldt/)		Registration No. 58,311	
Date   -2	1-7		Telephone No. (651)338-2626	
NOTE: Withdrawal is effective when approved rether than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a fine period for response or possible extension period, the request to withdraw is normally disapproved.				

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to fite (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the complete application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.